

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

To Protect Our Heritage PAC

ADDRESS (number and street) 2421 W. Pratt

Check if different than previously reported. (ACC) Chicago IL 60645

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00135541

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 01 / 01 / 2015 through [MM] / [DD] / [YYYY] 06 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Alan E. Molotsky

Signature of Treasurer Alan E. Molotsky [Electronically Filed] Date 07 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

To Protect Our Heritage PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="203481.57"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="203481.57"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="11801.90"/>	<input type="text" value="11801.90"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="215283.47"/>	<input type="text" value="215283.47"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21728.90"/>	<input type="text" value="21728.90"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="193554.57"/>	<input type="text" value="193554.57"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

To Protect Our Heritage PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8200.00	8200.00
(ii) Unitemized	3420.00	3420.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11620.00	11620.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	11620.00	11620.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	181.90	181.90
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	11801.90	11801.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11801.90	11801.90

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1728.90	1728.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1728.90	1728.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	20000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21728.90	21728.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21728.90	21728.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	11620.00	11620.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11620.00	11620.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1728.90	1728.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1728.90	1728.90

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Sanford L Barr
 Full Name (Last, First, Middle Initial)
 Mailing Address 832 Dauphine Court
 City Northbrook State IL Zip Code 60062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sanford L. Barr, DDS Occupation Dentist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **05 / 17 / 2015**
Transaction ID : SA11AI.7150
 Amount of Each Receipt this Period **1000.00**
 Contribution to our PAC

B. Jonah Bruck
 Full Name (Last, First, Middle Initial)
 Mailing Address 7366 N. Lincoln Ave.
 City Lincolnwood State IL Zip Code 60712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Olympia Group LLC Occupation Healthcare executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 04 / 2015**
Transaction ID : SA11AI.7181
 Amount of Each Receipt this Period **250.00**
 Contribution to our PAC

C. Fred Diamond
 Full Name (Last, First, Middle Initial)
 Mailing Address 3812 Harvest Lane
 City Glenview State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Behr Iron and Steel Inc. Occupation Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **04 / 30 / 2015**
Transaction ID : SA11AI.7197
 Amount of Each Receipt this Period **250.00**
 Contribution to our PAC

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Shayle Gerstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 9655 Woods Dr.
 City Skokie State IL Zip Code 60077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2015
Transaction ID : SA11AI.7163
 Amount of Each Receipt this Period 250.00
 Contribution to our PAC

B. Andrew Glatz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2908 W Fargo
 City Chicago State IL Zip Code 60645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Crown Heights Realty Occupation Real Estate Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2015
Transaction ID : SA11AI.7195
 Amount of Each Receipt this Period 600.00
 Contribution to our PAC

C. Mr. Mickey Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 7351 N. Keeler
 City Lincolnwood State IL Zip Code 60712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Imperial Nursing Center Occupation Building Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.7167
 Amount of Each Receipt this Period 250.00
 Contribution to our PAC

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

Full Name (Last, First, Middle Initial) A. Dr. Burton Herbstman			Date of Receipt MM / DD / YYYY 06 / 05 / 2015 Transaction ID : SA11AI.7166
Mailing Address 1154 Stratford			Amount of Each Receipt this Period 250.00
City Deerfield	State IL	Zip Code 60015	Contribution to our PAC
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00	
Name of Employer Northwest Heart Specialists	Occupation Physician	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Larry Hochberg			Date of Receipt MM / DD / YYYY 06 / 05 / 2015 Transaction ID : SA11AI.7157
Mailing Address 275 N. Deere Park E.			Amount of Each Receipt this Period 1000.00
City Highland Park	State IL	Zip Code 60035	Contribution to our PAC
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00	
Name of Employer Self	Occupation Investor	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gerald Lewis			Date of Receipt MM / DD / YYYY 05 / 17 / 2015 Transaction ID : SA11AI.7175
Mailing Address 3948 Raintree Lane			Amount of Each Receipt this Period 500.00
City Northbrook	State IL	Zip Code 60062	Contribution to our PAC
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00	
Name of Employer Primary Care Medical Specialis	Occupation Physician	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

Full Name (Last, First, Middle Initial)
A. Seymour Lipton

Mailing Address 8921 Kenton

City Skokie State IL Zip Code 60076

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2015
Transaction ID : SA11AI.7155

Amount of Each Receipt this Period
500.00

Contribution to our PAC

Full Name (Last, First, Middle Initial)
B. Max Lorig

Mailing Address 718 Carlyle Court

City Northbrook State IL Zip Code 60062

FEC ID number of contributing federal political committee. **C**

Name of Employer Lorig Construction Occupation Civil engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2015
Transaction ID : SA11AI.7151

Amount of Each Receipt this Period
1000.00

Contribution to our PAC

Full Name (Last, First, Middle Initial)
C. Steve Miretzky

Mailing Address 3112 W. Sherwin

City Chicago State IL Zip Code 60645

FEC ID number of contributing federal political committee. **C**

Name of Employer Hunter Management Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2015
Transaction ID : SA11AI.7171

Amount of Each Receipt this Period
300.00

Contribution to our PAC

SUBTOTAL of Receipts This Page (optional).....▶	1800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Michael Nussbaum
Full Name (Last, First, Middle Initial)

Mailing Address 6141 N. Drake

City Chicago State IL Zip Code 60659

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 30 / 2015
Transaction ID : SA11AI.7200

Amount of Each Receipt this Period 300.00

Contribution to our PAC

B. Sheldon Reitman
Full Name (Last, First, Middle Initial)

Mailing Address 6401 N. Knox

City Lincolnwood State IL Zip Code 60712

FEC ID number of contributing federal political committee. **C**

Name of Employer Shephard Schwartz Occupation Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2015
Transaction ID : SA11AI.7153

Amount of Each Receipt this Period 250.00

Contribution to our PAC

C. Steven Rothke
Full Name (Last, First, Middle Initial)

Mailing Address 7633 N. Arcadia

City Morton Grove State IL Zip Code 60053

FEC ID number of contributing federal political committee. **C**

Name of Employer NeuroBehavior & Rehab Network Occupation Neuropsychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2015
Transaction ID : SA11AI.7154

Amount of Each Receipt this Period 250.00

Contribution to our PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Eric Rothner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2201 W. Main St.
 City Evanston State IL Zip Code 60202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hunter Management Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2015
Transaction ID : SA11AI.7162
 Amount of Each Receipt this Period
 1000.00
 Contribution to our PAC

B. Wendy Wagner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1415 Juli Lyn Lane
 City Northbrook State IL Zip Code 60062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 14 / 2015
Transaction ID : SA11AI.7165
 Amount of Each Receipt this Period
 250.00
 Contribution to our PAC

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	8200.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

Full Name (Last, First, Middle Initial)
A. Constant Contact .com

Mailing Address 1601 Trapelo Road

City Waltham State MA Zip Code 02451

Purpose of Disbursement
Membership contact software license

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 11 / 2015

Transaction ID : SB21B.7146

Amount of Each Disbursement this Period
65.55

Category/Type
001

Full Name (Last, First, Middle Initial)
B. Constant Contact .com

Mailing Address 1601 Trapelo Road

City Waltham State MA Zip Code 02451

Purpose of Disbursement
Membership contact software annual license

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 19 / 2015

Transaction ID : SB21B.7147

Amount of Each Disbursement this Period
668.52

Category/Type
001

Full Name (Last, First, Middle Initial)
C. Kinkos Copy Center

Mailing Address 8810 Skokie Blvd.

City Skokie State IL Zip Code 60077

Purpose of Disbursement
Printing of mailing to members

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2015

Transaction ID : SB21B.7148

Amount of Each Disbursement this Period
572.37

Category/Type
003

SUBTOTAL of Disbursements This Page (optional).....▶	1306.44
TOTAL This Period (last page this line number only).....▶	1306.44

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

Full Name (Last, First, Middle Initial)

A. HOYER FOR CONGRESS

Mailing Address 7905 MALCOLM ROAD SUITE 102

City CLINTON State MD Zip Code 20735

Purpose of Disbursement
Contribution to campaign

011

Candidate Name

HOYER FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President
State: MD District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SB23.7124

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. KINZINGER FOR CONGRESS

Mailing Address PO Box 1050

City Bourbonnais State IL Zip Code 60914

Purpose of Disbursement
Contribution to campaign

011

Candidate Name

KINZINGER FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 11

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : SB23.7129

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MARK STEVEN KIRK

Mailing Address P.O. Box 8

City Winnetka State IL Zip Code 60093

Purpose of Disbursement
Contribution to campaign

011

Candidate Name

MARK STEVEN KIRK

Category/
Type

Office Sought: House
 Senate
 President
State: IL District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2015

Transaction ID : SB23.7127

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

Full Name (Last, First, Middle Initial)

A. QUIGLEY FOR CONGRESS

Mailing Address PO Box 13040

City Chicago State IL Zip Code 60613

Purpose of Disbursement
Contribution to campaign

011

Candidate Name

QUIGLEY FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2015

Transaction ID : SB23.7128

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. ROYCE CAMPAIGN COMMITTEE

Mailing Address PO BOX 3249

City FULLERTON State CA Zip Code 92834

Purpose of Disbursement
Contribution to campaign

011

Candidate Name

ROYCE CAMPAIGN COMMITTEE

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 39

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2015

Transaction ID : SB23.7135

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

5500.00

TOTAL This Period (last page this line number only)..... ▶

20000.00